Fill in this information to identify your case:	entered 06/17/19 16:04:45	Desc Main
United States Bankruptcy Court for the:	Document Page 1 of 67	
Northern District of Illinois		
Case number (If known):	Chapter you are filing under:	
	Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your	Tara First name	First name			
	driver's license or passport).	Middle name	Middle name			
	Bring your picture identification to your meeting with the trustee.	West Last name	Last name			
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)			
2.	All other names you have used in the last 8 years					
	Include your married or maiden	First name	First name			
	names.	Middle name	Middle name			
		Last name	Last name			
		First name	First name			
		Middle name	Middle name			
		Last name	Last name			
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>8 4 8 5</u>	xxx-xx			
	federal Individual Taxpayer	OR	OR			
	Identification number (ITIN)	9xx-xx	9xx - xx			

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☑I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	Include trade names and doing business as names	Business name	Business name
		Business name	Business name
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1255 W. 112th St Number Street	Number Street
		Chicago, IL 60643 City State ZIP Code	City State ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing <i>this</i> district to file for bankruptcy	Check one:	Check one:
	district to the for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)

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Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Code you are choosing to file  $\sqrt{}$ Chapter 7 under Chapter 11 Chapter 12 Chapter 13 How you will pay the fee ☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☑ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. ☐No. Have you filed for bankruptcy Yes. District Northern District of Illinois within the last 8 years? When 08/10/2016 Case number 16-25648 MM / DD / YYYY When \_\_\_\_ District Case number When \_\_\_\_ Case number District MM / DD / YYYY **✓**No. 10. Are any bankruptcy cases Yes. Debtor \_ pending or being filed by a Relationship to you spouse who is not filing this When Case number, if known case with you, or by a business District partner, or by an affiliate? MM / DD / YYYY Relationship to you Debtor When District Case number, if known MM / DD / YYYY No. Go to line 12. 11. Do you rent your residence? Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12.

of this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part

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		$   \sqrt{} $	No. Go to	o Part 4.					
12.	Are you a sole proprietor of any full- or part-time business?		Yes. Nan	ne and location of busi	ness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of	business, if any					
	a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate		Number	Street					
	sheet and attach it to this petition.								
			City			State	ZIP Code		
			_	ne appropriate box to d	-				
			_	Ith Care Business (as gle Asset Real Estate (			<b>\</b> \		
			_	ckbroker (as defined in			))		
			_	nmodity Broker (as defi	_	, , , ,			
			_	e of the above		3 ( //			
	For a definition of <i>small business</i> debtor, see 11 U.S.C. § 101(51D).		No. Yes.	Bankruptcy Code.	oter 11, but I a		ess debtor according to ebtor according to the de		
ar	t 4: Report if You Own or Ha	ave ,	Any Ha	zardous Property	or Any Pr	roperty That Nee	ds Immediate Atte	ention	Баппарюў
	·		Any Ha: No.	zardous Property	or Any Pr	roperty That Nee	ds Immediate Atte	ention	. Dan intupicy
	Do you own or have any property that poses or is alleged to pose a threat of		No.	zardous Property /hat is the hazard? _	or Any Pr	roperty That Nee	ds Immediate Atte	ention	- Lai mupicy
	Do you own or have any property that poses or is	<b>4</b>	No. Yes. W	/hat is the hazard? _ _			ds Immediate Atte		
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate	<b>4</b>	No. Yes. W	/hat is the hazard? _ _					
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that	<b>4</b>	No. Yes. W	/hat is the hazard?	needed, why	is it needed?			
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that	<b>4</b>	No. Yes. W	/hat is the hazard?	needed, why	is it needed?			

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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

l certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

)	I am not required to receive a briefing about credit
	counceling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part 6: Answer These Questions for Reporting Purposes									
16. What kind of debts do you  16. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred an individual primarily for a personal, family, or household purpose."					ed in 11 U.S.C. § 101(8) as "incurred by				
have?			No. Go to line 16b.	☐ No. Go to line 16b.					
			✓ Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			Yes. Go to line 17.						
		16c.	State the type of debts you o	owe that are not consumer debts or business	debts.				
17.	Are you filing under Chap	ter 7? 🔲	No. I am not filing under C	Chapter 7. Go to line 18.					
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be		ed ses		Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No					
	available for distribution t unsecured creditors?	0	☐ Yes						
		₹	1-49 🔲 50-99	1,000-5,000  5,001-10,000	<b>2</b> 5,001-50,000 <b>5</b> 0,000-100,000				
18.	How many creditors do yo estimate that you owe?	u 🔲	100-199 🔲 200-999	10,001-25,000	☐ More than 100,000				
		√	\$0-\$50,000	\$1,000,001-\$10 million	☐ \$500,000,001-\$1 billion				
19.	How much do you estimat	е 🔲	\$50,001-\$100,000	<b>\$10,000,001-\$50 million</b>	\$1,000,000,001-\$10 billion				
	your assets to be worth?		\$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion				
			\$500,001-\$1 million	\$100,000,001-\$500 million	☐ More than \$50 billion				
		<b>√</b>	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion				
20.	How much do you estimat	е 🔲	\$50,001-\$100,000	310,000,001-\$50 million	31,000,000,001-\$10 billion				
	your liabilities to be?		\$100,001-\$500,000	\$50,000,001-\$100 million	310,000,000,001-\$50 billion				
			\$500,001-\$1 million	\$100,000,001-\$500 million	☐ More than \$50 billion				
Par	t 7: Sign Below								
Fo	-		•	under penalty of perjury that the information p					
				n aware that I may proceed, if eligible, under r each chapter, and I choose to proceed und	Chapter 7, 11,12, or 13 of title 11, United States er Chapter 7.				
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
			, ,	ter of title 11, United States Code, specified	in this petition.				
				cealing property, or obtaining money or prope onment for up to 20 years, or both. 18 U.S.C.	erty by fraud in connection with a bankruptcy case §§ 152, 1341, 1519, and 3571.				
		X /s/ Tara	a West						
		Tara We	est, Debtor 1						
	Executed on 06/17/2019  MM/ DD/ YYYY								

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert J Adams	Date <b>06/17/2019</b>
Robert J Adams, Attorney	MM / DD / YYYY
Robert J Adams	
Printed name	
Robert J. Adams & Associates	
Firm name	
540 E. 35th Street	
Number Street	
Chicago	<u>IL 60616</u>
City	State ZIP Code
Contact phone (312) 346-0100	Email address staff.rja@gmail.com
0013056	IL.
0013030	

Fill in this information	to identify your case a	nd this filing:	="	17/19 16:04:45	Desc Main
Debtor 1	<b>Tara</b> First Name	Middle Na	West ame Last Name		
Debtor 2 (Spouse, if filing) United States Bankru Case number	First Name uptcy Court for the:	Middle Na	ame Last Name  Northern District of Illinois		☐ Check if this is an amended filing
Official Form		rty			12/15
fits best. Be as complespace is needed, attace  Part 1: Describe	ete and accurate as pha a separate sheet to Each Residence ave any legal or equit	ossible. If tw this form. O	t an asset only once. If an asset fits in more than wo married people are filing together, both are enter the top of any additional pages, write your nature.  Land, or Other Real Estate You Own tin any residence, building, land, or similar properties.	qually responsible for sup ime and case number (if kn or Have an Interest I	plying correct information. If more nown). Answer every question.
Yes. Where is			What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	amount of any sec Creditors Who Ha Current value of the	ured claims or exemptions. Put the ured claims on Schedule D: ave Claims Secured by Property.  Current value of the
City	State	ZIP Code	☐ Land ☐ Investment property ☐ Timeshare ☐ Other Who has an interest in the property? Check or	as fee simple, tena estate), if known.	portion you own?  e of your ownership interest (such ncy by the entireties, or a life
			☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is	community property

\$0.00

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....

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Par	t 2: Describe Your	Vehicles					
<b>Do y</b> you c	you own, lease, or have le	egal or equitable intere	st in any vehicles, whether they are registered or not? li le, also report it on <i>Schedule G: Executory Contracts and</i>	nclude any vehicles Unexpired Leases.			
[	Cars, vans, trucks, tracto ☐ No ☑ Yes	ors, sport utility vehicle	s, motorcycles				
3	3.1 Make:  Model:	Volkswagen  Jetta	Who has an interest in the property? Check one.  ✓ Debtor 1 only  Debtor 2 only	Do not deduct secured cla amount of any secured cla Creditors Who Have Clair			
	Year: Approximate mileage: Other information:	<u>2014</u> <u>140000</u>	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Current value of the entire property? \$5,695.00	Current value of the portion you own? \$5,695.00		
5.	Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  No  Yes						
Do	you own or have any leg	gal or equitable interest	in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
L	Household goods and fu  Examples: Major appliar  No Yes. Describe	nces, furniture, linens, c	hina, kitchenware iture of various ages		\$150.00		
			stereo, and digital equipment; computers, printers, scanr nes, cameras, media players, games	ners; music collections;			
[	☐ No ☑ Yes. Describe	Two Computers, T	wo Computers, Cell Phone and other assorted electronic	items	\$400.00		
į	<ul> <li>Collectibles of value</li> <li>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles</li> <li>✓ No</li> <li>✓ Yes. Describe</li> </ul>						

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_	Fautism and faut an order and backling	
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No ☐ Yes. Describe	
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment  ✓ No	
	Yes. Describe	
11.	Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	\$220.00
	Yes. Describe	<u> </u>
12.	Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	<b>☑</b> No	
	☐ Yes. Describe	
13.		
	Examples: Dogs, cats, birds, horses  ☑ No	
	☐ Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No ☐ Yes. Describe	
45	Additional deliberation of all of comments of the Post O Scientific and the Comments of the Co	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$770.00
Ра	rt 4: Describe Your Financial Assets	
Do	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		
	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition  No Yes	\$80.00
	<b>⊻</b> Yes Cash	<u> </u>

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17.	<ul> <li>Deposits of money</li> <li>Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.</li> <li>No</li> <li>Yes</li> </ul>							
		Institution name:						
17.1	Checking account:	PNC Bank	\$10.00					
17.2	Checking account:		<u></u>					
17.3	Savings account:		<del>-</del>					
17.4	Savings account:		<del></del>					
17.5	Certificates of deposit:							
17.6	Other financial account:		- <u></u>					
17.7	Other financial account:		- <u></u>					
17.8	. Other financial account:		- <u></u>					
17.9	Other financial account:		- <u></u>					
18.	, , , , , , , , , , , , , , , , , , ,	ablicly traded stocks estment accounts with brokerage firms, money market accounts						
19.		and interests in incorporated and unincorporated businesses, inclu pint venture	uding an interest in					
	✓ No ☐ Yes. Give specific information about them							
20.	Negotiable instruments include	e bonds and other negotiable and non-negotiable instruments de personal checks, cashiers' checks, promissory notes, and money ordere those you cannot transfer to someone by signing or delivering them.						
21.	Retirement or pension acce  Examples: Interests in IRA  ✓ No  ☐ Yes. List each account separately.	punts , ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension	on or profit-sharing plans					

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Debtor 1 Page 12 of 67 Dogument Middle Name 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **√** No ☐ Yes..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **√** No ☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **✓** No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **✓** No ☐ Yes. Give specific information about them.... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **√** No ☐ Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. Tax refunds owed to you **√** No ☐ Yes. Give specific information about Federal: them, including whether you State: already filed the returns and the tax years..... Local:

#### 29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

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	✓ No ☐ Yes. Give specific information		Alimony: Maintenance: Support: Divorce settlement: Property settlement:	
30.	Other amounts someone owes you  Examples: Unpaid wages, disability insurance Security benefits; unpaid loans you  ✓ No  ☐ Yes. Give specific information	ce payments, disability benefits, sick pay, vacation pay, workers' comp u made to someone else	pensation, Social	
31.	Interests in insurance policies  Examples: Health, disability, or life insurance  ✓ No  ☐ Yes. Name the insurance company of each policy and list its value	e; health savings account (HSA); credit, homeowner's, or renter's ins  Company name:  Beneficiary:		Surrender or refund value:
32.	, , , ,	n someone who has died ct proceeds from a life insurance policy, or are currently entitled to re	eceive property	
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes  ✓ No  ☐ Yes. Describe each claim	you have filed a lawsuit or made a demand for payment, insurance claims, or rights to sue		
34.	Other contingent and unliquidated claims to set off claims  No  Yes. Describe each claim	of every nature, including counterclaims of the debtor and right	es	
35.	Any financial assets you did not already list  ✓ No  ☐ Yes. Give specific information			
36.		om Part 4, including any entries for pages you have attached	→	\$90.00

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7.		
	√ No. Go to Part 6.	
	Yes. Go to line 38.	
		Current value of the portion you own?  Do not deduct secure claims or exemptions
	Accounts receivable or commissions you already earned	
	✓ No ☐ Yes. Describe	
	Office equipment, furnishings, and supplies	
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, elect	ronic devices
	✓ No ☐ Yes. Describe	
	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes. Describe	
	Inventory	
	✓ No ☐ Yes. Describe	
	Interests in partnerships or joint ventures	
	✓ No ☐ Yes. Describe	
	Customer lists, mailing lists, or other compilations  ✓ No	
	Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	✓ No ☐ Yes. Describe	
	Any business-related property you did not already list	
	✓ No  Yes. Give specific information	
	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.0

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46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.	
	Yes. Go to line 47.	
	165. GO to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals	
	Examples: Livestock, poultry, farm-raised fish	
	☑ No	
	☐ Yes	
48.	Crops—either growing or harvested	
	<b>☑</b> No	
	Yes. Give specific	
	information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	<b>☑</b> No	
	☑ Yes	
50.	Farm and fishing supplies, chemicals, and feed	
00.		
	☑ No □ Yes	
51	Any farm- and commercial fishing-related property you did not already list	
01.		
	✓ No ☐ Yes. Give specific	
	information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached	
	for Part 6. Write that number here	\$0.00
Par	t 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	
	<b>√</b> No	
	Yes. Give specific	
	information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
Par	t 8: List the Totals of Each Part of this Form	

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	r iist rame iviidale rame -L	asi ivanie -				
55.	Part 1: Total real estate, line 2			→		\$0.00
56.	Part 2: Total vehicles, line 5		\$5,695.00			
57.	Part 3: Total personal and household items, line 15		\$770.00			
58.	Part 4: Total financial assets, line 36		\$90.00			
59.	Part 5: Total business-related property, line 45		\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00			
61.	Part 7: Total other property not listed, line 54	+	\$0.00			
62.	Total personal property. Add lines 56 through 61		\$6,555.00	Copy personal property total →	+	\$6,555.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				_	\$6,555.00

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			IMCIIIICIII	
Fill in this information	to identify your case:			
Debtor 1	Tara		West	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:	1	Northern District of	Illinois
Case number (if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	s Exempt		
<ol> <li>Which set of exemptions are you claiming? Che         ✓ You are claiming state and federal nonbankrupt             ☐ You are claiming federal exemptions. 11 U.S.C</li> <li>For any property you list on Schedule A/B that you have a set of exemptions.</li> </ol>	ccy exemptions. 11 U.S.C. § 5. § 522(b)(2)	522(b)(3)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: Four rooms of furniture of various ages  Line from Schedule A/B: 6	\$150.00	\$150.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-902
Brief description: Two Computers, Two Computers, Cell Phone and other assorted electronic items  Line from	\$400.00	\$400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B: 7  3. Are you claiming a homestead exemption of mo (Subject to adjustment on 4/01/22 and every 3 year)	. ,	or after the date of adjustment.)	
✓ No ☐ Yes. Did you acquire the property covered by th ☐ No ☐ Yes	e exemption within 1,215 da	ys before you filed this case?	

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Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Brief description:  Clothing  Line from Schedule A/B:11	\$220.00	\$220.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description:  Cash  Line from Schedule A/B: 16	\$80.00	\$80.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: PNC Bank Checking account Line from Schedule A/B: 17	\$10.00	\$10.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

_	40.47007		='1 100/47/40 = 10	<del>24</del> 7/10 10:04:4	E Dago Mai	_
Fill in this information	to identify your case:			17/19 16:04:4	5 Desc Mai	Π
Debtor 1	Tara		West			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	iptcy Court for the:		Northern District of Illinois			
Case number					☐ Check if t	his is an
(if known)					amended	filing
Official Form		rs Who F	lave Claims Secure	ed by Prope	rty	12/15
tnown).  I. Do any creditors have a No. Check this be a Yes. Fill in all of the second	ve claims secured by y	your property?	ies, and attach it to this form. On the top	, , , ,	s, write your name a	nd case number (if
each claim. If mor	re than one creditor ha	as a particular clair	ecured claim, list the creditor separately for m, list the other creditors in Part 2. As muc to the creditor's name.		Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Capital One Auto	Finance	Describe	the property that secures the claim:	\$14,254.93	\$5,695.00	\$8,559.93
Creditor's Name 3901 Dallas Park		2014 Vol	kswagen Jetta			
	reet	As of the	date you file, the claim is: Check all that apply.			
Plano, TX 75093 City	State ZIP C					
Who owes the d	lebt? Check one.	Unliqu	·			
☑ Debtor 1 only		☐ Disput				
Debtor 2 only		Nature of	lien. Check all that apply.			
Debtor 1 and [	Debtor 2 only	□ An agr				
At least one of			eement you made (such as mortgage or			
	the debtors and anothe	er secure	ed car loan)			
	claim relates to a	secure	ed car loan) ory lien (such as tax lien, mechanic's lien)			
Check if this community do	claim relates to a ebt	secure  Statuto  Judgm	ed car loan)			

Last 4 digits of account number \_\_\_ \_\_ \_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$14,254.93

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Additional Page  Part 1: After listing any entries on t 2.3, followed by 2.4, and so	his page, number them beginning with forth.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name  Number Street  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number			
•	ımn A on this page. Write that number here: e dollar value totals from all pages. Write that number		<u>54.93</u>	

	10 1700			17/19 16:04:45	Desc Ma	nin
Fill in this information to	o identify your case:			7	2000	
Debtor 1	Tara		West			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:		Iorthern District of Illinois			
Case number (if known)					Check if amende	f this is an ed filing
Official Form	106E/F					
Schedule E	E/F: Credi	tors Who	Have Unsecured C	laims		12/15
D: Creditors Who Hold the Continuation Page  Part 1: List All o  1. Do any creditors  Value No. Go to Par  Yes.  2. List all of your pri identify what type opossible, list the cl Part 1. If more tha	f Claims Secured & to this page. On the f Your PRIORIT have priority unsect t 2.  fority unsecured claim it is. If a claim aims in alphabetical in one creditor holds	e top of any addition  Y Unsecured Claured claims against  aims. If a creditor has me has both priority are order according to the aparticular claim, list a particular claim, list	you?  more than one priority unsecured claim, lid nonpriority amounts, list that claim here are creditor's name. If you have more than that the other creditors in Part 3.	I, fill it out, number the en mber (if known).  st the creditor separately found show both priority and	tries in the boxe or each claim. Fo	or each claim listed, nts. As much as
(For an explanatio	on of each type of cla	aim, see the instructio	ns for this form in the instruction booklet.)	Total claim	Priority amount	Nonpriority amount
				J.dilli		
Priority Creditor's	s Name		Last 4 digits of account number			
			When was the debt incurred?			
Number S	Street		As of the date you file, the claim is: Ch apply.	eck all that		
-			☐ Contingent			
City	Stat	e ZIP Code	☐ Unliquidated			
•	the debt? Check or		Disputed			
Debtor 1 on		.0.	Type of PRIORITY unsecured claim:			
Debtor 2 on			Domestic support obligations	d		
Debtor 1 an			Taxes and certain other debts you ov government	ve the		
	of the debtors and a is claim is for a cor		Claims for death or person injury wh	nile you were		
Is the claim sul		innumity debt	intoxicated	•		
□ No □ Yes	aject to onset?		☐ Other. Specify			

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	Liaims	
Do any creditors have nonpriority unsecured claims against	you?	
☐ No. You have nothing to report in this part. Submit this form		
✓ Yes.	, ,	
	Seek and an of the considerable health control about 16 and 26 about 16 and 16	
unsecured claim, list the creditor separately for each claim. For	cical order of the creditor who holds each claim. If a creditor has more than one nonpriority each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If you have more than three nonpriority unsecured claims fill out the Continuation Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Part 3.	
1 41.2.	Total claim	
<b>□</b>		434.93
Americash Loans Nonpriority Creditor's Name	Last 4 digits of account number	107.00
' '	When was the debt incurred?	
PO Box 187 Number Street	As of the date you file, the claim is: Check all that apply.	
Des Plaines, IL 60016	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	Disputed	
who incurred the debt? Check one.  ☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Student loans	
<ul><li>☐ Debtor 2 only</li><li>☐ Debtor 1 and Debtor 2 only</li></ul>	Obligations arising out of a separation agreement or	
	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	Other. Specify	
<b>☑</b> No		
☐ Yes		
2 Athletico	Last 4 digits of account number \$4,5	500.00
Nonpriority Creditor's Name	-	
c/o East Bank Club	When was the debt incurred?	
500 N. Kingsbury	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
Chicago, IL 60610	Unliquidated	
City State ZIP Code	□ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
At least one of the debtors and another	similar debts	
Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
☑ No		
☐ Yes		
City Of Chicago(Parking Tickets)	Last 4 digits of account number \$1,9	921.40
Nonpriority Creditor's Name	When was the debt incurred?	
Office Of The Clerk: Attn: Anna Valencia	As of the date you file, the claim is: Check all that apply.	
121 N. LaSalle 107A	— Contingent	
Number Street	☐ Unliquidated	
Chicago, IL 60602  City State ZIP Code	Disputed	
•	·	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	<ul><li>Obligations arising out of a separation agreement or</li></ul>	
Debtor 2 only	divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
At least one of the debtors and another	similar debts	
☐ Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset? ☑ No ☑ Yes		

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Case number (if known) \_

t 2: Your NONPRIORITY Unsecured Claims - Co er listing any entries on this page, number them beginning	-	Total claim
Comenity Bank/Victoria Secret	Look A digito of account number	\$232.0
Nonpriority Creditor's Name	Last 4 digits of account number	
Po Box 182789	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Columbus, OH 43218 City State ZIP Code	Contingent	
,	☐ Unliquidated	
Who incurred the debt? Check one.  Debtor 1 only	☐ Disputed	
	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
☐ Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
<b>☑</b> No		
☐ Yes		
Credit Acceptance Corp	Last 4 digits of account number	\$150.
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 513  Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Southfield, MI 48037 City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only		
,	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	☑ Other. Specify	
√ No	— Outor. Opposity	
☐ Yes		
Credit First National Association	Last 4 digits of account number	\$1,152.0
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 81083 Number Street	As of the date you file, the claim is: Check all that apply.	
Cleveland, OH 44181	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
☐ At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?  ☑ No	☑ Other. Specify	

☐ Yes

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First Name Middle Name Last Name

Credit One Bank	Last 4 digits of account number	\$450.
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 98872 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Las Vegas, NV 89193 City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	·	
Debtor 2 only	Type of NONPRIORITY unsecured claim:  Student loans	
_		
Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No		
☐ Yes		
Direct Loan Service System	Last 4 digits of account number	\$5,000
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 5609	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
Greenville, TX 75403  City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	<u> </u>	
Debtor 1 only	Disputed	
	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No		
☐ Yes		
First American Financial	Last 4 digits of account number	\$200.
Nonpriority Creditor's Name	When was the debt incurred?	
801 W 10302 S Halsted Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Chicago, IL 60628  City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset? ☑ No	☑ Other. Specify	
☐ Yes		

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er listing any entries on this page, number them beginning		
First Rate Financial	Last 4 digits of account number	\$200
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Chicago, IL 60619	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only	☐ Student loans	
☐ Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or</li> </ul>	
☐ At least one of the debtors and another	divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?  ✓ No	☑ Other. Specify	
GFS II LLC; dba Gateway Financial Solutions	Last 4 digits of account number	\$4,885
Nonpriority Creditor's Name	•	
c/o Walinski & Associates	When was the debt incurred?  As of the date you file the claim is: Check all that apply	
2215 Enterprise Dr Ste 1512	As of the date you file, the claim is: Check all that apply.  Contingent	
Number Street	☐ Unliquidated	
Westchester, IL 60154-5804 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	<ul> <li>Debts to pension or profit-sharing plans, and other</li> </ul>	
☐ Check if this claim is for a community debt	similar debts	
•	☑ Other. Specify	
Is the claim subject to offset?  No		
☐ Yes		
		unkno
GFS II LLC; dba Gateway Financial Solutions Nonpriority Creditor's Name	Last 4 digits of account number	
c/o Walinski & Associates	When was the debt incurred?	
2215 Enterprise Dr Ste 1512	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
Westchester, IL 60154-5804	Unliquidated	
City State ZIP Code	☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
☐ Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
At least one of the debtors and another	similar debts	
☐ Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?		
☑ No		
☐ Yes		

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First Name Middle Name Last Name

Part	2: Your NONPRIORITY Unsecured Claims - Con-	tinuation Page	
After	r listing any entries on this page, number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
4.13	Greentrust Loans Nonpriority Creditor's Name	Last 4 digits of account number	\$600.00
	PO Box 340	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Hays, MT 59527	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	Is the claim subject to offset?	✓ Other. Specify	
	<b>☑</b> No		
	Yes		
4.14	MOHELA/DEPARTMENT OF ED	Last 4 digits of account number	unknown
	Nonpriority Creditor's Name	When was the debt incurred?	
	633 SPIRIT DRIVE Number Street	As of the date you file, the claim is: Check all that apply.	
	Chesterfield, MO 63005	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No	_ 3.101.35331.)	
	Yes		
4.15	Peoples Energy	Last 4 digits of account number	\$562.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	130 E. Randolph Dr. Number Street	As of the date you file, the claim is: Check all that apply.	
	Chicago, IL 60687-6207	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
	Is the claim subject to offset?	similar debts	
	No	☑ Other. Specify	
	Yes		

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Tara Dowalsment Page 27 of 67 Case number (if known) \_\_\_

First Name Middle Name Last Name

Part	2: Your NONPRIORITY Unsecured Claims - Co	ntinuation Page	
Afte	r listing any entries on this page, number them beginning v	vith 4.5, followed by 4.6, and so forth.	Total claim
4.16	Prog Leasing, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$1,250.00
	256 W Data Dr	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Draper, UT 84020-2315	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No		
	☐ Yes		
4.17	Sprint	Last 4 digits of account number	\$385.00
,	Nonpriority Creditor's Name		
	P.O.Box 600760	When was the debt incurred?	
	P.O.Box 600760	As of the date you file, the claim is: Check all that apply.  Contingent	
	Number Street		
	Jacksonville, FL 32260-0670 City State ZIP Code	Unliquidated Disputed	
	Who incurred the debt? Check one.	·	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:  Student loans	
	,		
	Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify	
	Is the claim subject to offset?		
	<b>☑</b> No		
	Yes		
4.18	State Collection Service	Last 4 digits of account number	unknown
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 6250 Number Street	As of the date you file, the claim is: Check all that apply.	
	Madison, WI 53701	☐ Contingent	
	City State ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or</li> </ul>	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	<ul> <li>Debts to pension or profit-sharing plans, and other</li> </ul>	
	Is the claim subject to offset?	similar debts	
	No	Other. Specify	
	Yes		
	<b>—</b> 163		

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Debtor 1 Tara Downstan Page 28 of 67 Case number (if known) Last Name

Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim \$3,185.00 4.19 **University of Chicago Medicine** Last 4 digits of account number. Nonpriority Creditor's Name When was the debt incurred? 33343 Collections Dr As of the date you file, the claim is: Check all that apply. Number Contingent Chicago, IL 60693 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ■ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts Is the claim subject to offset? ✓ Other. Specify **☑** No ☐ Yes unknown 4.20 Walinski & Associates, PC Last 4 digits of account number \_\_\_\_ Nonpriority Creditor's Name When was the debt incurred? \_\_ 221 N Lasalle 1000 As of the date you file, the claim is: Check all that apply. Number Street Contingent Chicago, IL 60601 ZIP Code State Unliquidated Who incurred the debt? Check one. Disputed ☑ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts

✓ Other. Specify

Is the claim subject to offset?

✓ No ☐ Yes Case 19-17237 Doc 1 Filed 06/17/19 Entered 06/17/19 16:04:45 Desc Main

Debtor 1 Tara Dowstment Page 29 of 67
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_\_

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claim

		Total claim
6a. Domestic support obligations	6a.	\$0.00
6b. Taxes and certain other debts you owe the government	6b.	\$0.00
6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$0.00
		Total claim
6f. Student loans	6f.	\$0.00

			Total claim
Total claims	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>+</b>	\$25,107.34
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$25,107.34

Total claims from Part 1

Fill in this information	to identify your case:				.7/19 16:04:45	Desc Main	
Debtor 1	Tara		West				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern District of Illinois		is			
Case number (if known)						Check if this is a amended filing	n

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom you h	nave the contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	e ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	e ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	e ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	e ZIP Code	
2.5				
	Name			
	Number	Street		
	City	State	e ZIP Code	

		10 1700				<b>1</b> 7/19 16:04:45	Desc Main
Fill i	in this information	to identify your case:	:			17/19 10:04:43 7	Desc Main
De	ebtor 1	Tara		West	J		
		First Name	Middle Name	Last Name			
De	ebtor 2						
(Sp	oouse, if filing)	First Name	Middle Name	Last Name			
Un	nited States Bankro	uptcy Court for the:	N	orthern District of Illino	is		
	ase number known)						Check if this is an amended filing
— Off	ficial Form	n 106H				J	
Sc	:hedule I	H: Your Co	odebtors				12/15
ooth	are equally response	onsible for supplyin	g correct informatior	n. If more space is neede	ed, copy the Add	itional Page, fill it out, and	married people are filing together, I number the entries in the boxes on ). Answer every question.
	<b>Do you have any</b> <b>☑</b> No ☐ Yes	codebtors? (If you a	are filing a joint case, o	do not list either spouse a	as a codebtor.)		
	Louisiana, Nevada	a, New Mexico, Puer		operty state or territory? ngton, and Wisconsin.)	(Community prop	perty states and territories i	nclude Arizona, California, Idaho,
	No. Go to line	3.					
	_	spouse, former spous	se, or legal equivalent	live with you at the time?			
	☑ No ☑ Yes. In whic	ch community state o	r territory did you live?		Fill ir	n the name and current add	dress of that person.
	Name						
	Number	Street					
	City		State ZIP Code				
	codebtor only if t	that person is a gua	rantor or cosigner. N		d the creditor on	Schedule D (Official Forr	erson shown in line 2 again as a n 106D), <i>Schedule E/F</i> (Official
	Column 1: Your co	odebtor			C	olumn 2: The creditor to w	hom you owe the debt
						Check all schedules that a	•

Official Form 106H Schedule H: Your Codebtors page 1 of 1

Schedule D, line \_\_\_\_

Schedule E/F, line \_\_\_\_\_

3.1

Name

Number

City

Street

State

ZIP Code

FIII	in this information to	identify your cas	se:	1 10011711		100	17/19 16	5:04:45	Desc M	lain	
D	ebtor 1	Tara First Name	Middle Name	West Last Name							
(S	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				_	if this is:	a	
С	nited States Bankrup ase number known)	tcy Court for the:		lorthern District of	f Illinois			□ <sub>A s</sub>	upplement sh	owing pos	stpetition ne following date
								MN	// DD / YYYY	<del></del>	
)f	ficial Form	106I									
36	chedule I:	Your In	come								12/15
	rt 1: Describe	Employment	ase number (if known	). Answer every qu	estion.						
	information.			Debt	or 1			Deb	tor 2 or non-	filing spo	use
	If you have more that attach a separate prinformation about a employers.	age with	Employment status Occupation	<b>✓</b> Emplo	yed 🗖 Not E	mployed		☐ Emplo	oyed  Not E	mployed	
	Include part time, so self-employed work		Employer's name Employer's address			ome Heal	th and Hospice	<u> </u>			
	Occupation may incor homemaker, if it			Number :				Number	Street		
				City	nes, IL 60018	State	Zip Code	City		State	Zip Code
Do	art 2: Give Deta	sils About Mo	How long employed	i there?						-	
Pc	dit 2. Give Deta	IIIS About IVIO	Titing income								
	are separated.		e date you file this forr			-					-
	If you or your non-fil attach a separate s	• .	more than one employe	er, combine the infor	mation for all	employe	s for that perso	n on the lines	below. If you	need mor	e space,
						For	Debtor 1	For Debto			
2.			and commissions (befo ulate what the monthly v		2.		\$4,472.82		\$0.00		
3.	Estimate and list n	nonthly overtime	e pav.		3. →		00.02	_	00.02		

\$4,472.82

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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			For Debtor 1		For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$4,472.82		\$0.00	
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$673.92		\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
	5e. Insurance	5e.	\$238.07		\$0.00	
	5f. Domestic support obligations	5f.	\$0.00		\$0.00	
	5g. Union dues	5g.	\$0.00		\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+	\$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$911.99		\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,560.83		\$0.00	
8.	List all other income regularly received:				<u> </u>	
	8a. Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts,					
	ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00		\$0.00	
	8b. Interest and dividends	8b.	\$0.00		\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive					
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		\$0.00	
	8d. Unemployment compensation	8d.	\$0.00		\$0.00	
	8e. Social Security	8e.	\$0.00		\$0.00	
	8f. Other government assistance that you regularly receive					
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00		\$0.00	
	8g. Pension or retirement income	8g.	\$0.00		\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+	\$0.00	
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00		\$0.00	
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$3,560.83	]+[	\$0.00	\$3,560.83
11.	State all other regular contributions to the expenses that you list in Schedule .	J.				
	Include contributions from an unmarried partner, members of your household, your of friends or relatives.	depende	ents, your roommates, a	nd othe	er	
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay expenses listed i	n <i>Sch</i> e	edule J.	
	Specify:			_	11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The result amount on the Summary of Your Assets and Liabilities and Certain Statistical Inform		•	me. Wi	rite that	\$3,560.83
	and and the command of your viscost and Edamined and Contain Statested Inform	iauori, ii	к арриос			Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this form?					-
	✓No.  ☐Yes. Explain:					

Debtor 1 Case 19-17237 Doc 1 Filed 06/17/19 Entered 06/17/19 16:04:45 Desc Main
First Name Middle Name Document Page 34 of 67

1. Employment information for Debtor 1

Occupation CNA

Employer's name Total Nurses Network

Employer's address 7028 West North Avenue
Number Street

Chicago, IL 60707
City State Zip Code

How long employed there? 8 years

Amount

Fil	l in this information to	identify your case:				<b>1</b> 7/19 16:04:4	15 D€	esc Mair	า	
		, ,				1				
D	ebtor 1	Tara First Name	Middle Name	West Last Name		Objects if the in-				
_		i iist ivaine	Middle Name	Last Name		Check if this is:	filing			
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		☐ An amended ☐ A supplemen	-	a cotto otition		
	Inited States Bankrupt	tcy Court for the:		Northern District	of Illinois	chapter 13 in			g date:	
_	ase number _					MM / DD / Y	YYY			
(it	f known)									
Of	fficial Form	106J								
So	chedule J	 : Your Ex	penses						12/15	
				ple are filing toge	ther, both are equally res	ponsible for supplyi	ng correct	information		_
nee	ded, attach another	sheet to this form.	On the top of any	additional pages,	write your name and cas	e number (if known)	. Answer e	every questi	on.	
Pa	art 1: Describe	our Household								
1.	Is this a joint case?	?								_
	☑No. Go to line 2.									
	Yes. <b>Does Debt</b> o	·		Evnenses for Ser	parate Household of Debtor	r 2				
2				Expenses for Sep	datate Flouseriold of Debtol	2.				_
۷.	Do you have deper Do not list Debtor 1 Debtor 2.		☐ No ✓ Yes. Fill out th	is information for	Dependent's relationsh Debtor 1 or Debtor 2		ndent's	Does de	pendent live	
	Do not state the dependents' names.		each dependent		Child	age				
	·				Crilia				<b>√</b> Yes.	
								_	☐Yes.	
								☐ No.	Yes.	
								☐ No.	Yes.	
								☐No.	☐Yes.	_
3.	Do your expenses i of people other tha your dependents?	-	<b>√</b> No □Yes							
Pa	art 2: Estimate	Your Ongoing M	Ionthly Expens	ses						
		-		-	ng this form as a supplem t the top of the form and f	•	-	ort expense	es as of a date after	r
	clude expenses paid	· ·	•	•			You	ır expenses		
	ch assistance and h			•	•			п одропосо		
4.	The rental or home ground or lot.	ownership expens	es for your reside	ence. Include first n	nortgage payments and an	y rent for the 4.			\$425.00	
	If not included in li	ne 4:								
	4a. Real estate taxes	S				4a.			\$0.00	
	4b. Property, homeo	owner's, or renter's i	nsurance			4b.			\$0.00	

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4c.

4d.

\$0.00

\$0.00

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Middle Name

			Your expenses					
5.	Additional mortgage payments for your residence, such as home equity loans	5.						
6.	Utilities:							
	6a. Electricity, heat, natural gas	6a.	\$375.00					
	6b. Water, sewer, garbage collection	6b.	\$0.00					
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$275.00					
	6d. Other. Specify:	6d.	\$0.00					
7.	Food and housekeeping supplies	7.	\$475.00					
8.	Childcare and children's education costs	8.	\$400.00					
9.	Clothing, laundry, and dry cleaning	9.	\$195.00					
10.	Personal care products and services	10.	\$40.00					
11.	Medical and dental expenses	11.	\$75.00					
12.	Transportation. Include gas, maintenance, bus or train fare.							
	Do not include car payments.	12.	\$350.00					
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$60.00					
14.	Charitable contributions and religious donations	14.	\$0.00					
15.	Insurance.							
	Do not include insurance deducted from your pay or included in lines 4 or 20.							
	15a. Life insurance	15a.	\$0.00					
	15b. Health insurance	15b.	\$0.00					
	15c. Vehicle insurance	15c.	\$140.00					
	15d. Other insurance. Specify:	15d.	\$0.00					
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.							
	Specify:	16.	\$0.00					
17.	Installment or lease payments:							
	17a. Car payments for Vehicle 1	17a.	\$450.00					
	17b. Car payments for Vehicle 2	17b.						
	17c. Other. Specify:	17c.						
	17d. Other. Specify:	17d.						
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00					
19.	Other payments you make to support others who do not live with you.  Specify:	19.	\$0.00					
20.								
	20a. Mortgages on other property	20a.	\$0.00					
	20b. Real estate taxes	20b.	\$0.00					
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00					
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00					
	20e. Homeowner's association or condominium dues	20e.	\$0.00					

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21.	Other. Specify:	See Additional Page	21.	<b>+</b> \$150.00
22.	Calculate your monthly exp	penses.		
	22a. Add lines 4 through 21		22a.	\$3,410.00
	22b. Copy line 22 (monthly e	expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add line 22a and 22b. 7	he result is your monthly expenses.	<b>22c</b> .	\$3,410.00
23.	Calculate your monthly ne	t income.		
	23a. Copy line 12 (your com	bined monthly income) from Schedule I.	23a.	\$3,560.83
	23b. Copy your monthly expe	enses from line 22c above.	23b. <b>.</b>	\$3,410.00
	23c. Subtract your monthly e	xpenses from your monthly income.		\$150.83
	The result is your mor	thly net income.	23c.	ψ100.05
24.	For example, do you expect	or decrease in your expenses within the year after you file this to finish paying for your car loan within the year or do you expect yo se or decrease because of a modification to the terms of your mor	our	
	✓ No.  ☐ Yes.	,		

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Middle Name

	Amount
21. <b>Other</b>	
Emergency	\$75.00
Miscellaneous	\$75.00

Fill in this information	to identify your case:			17/19 16:04:4	5 Desc Main
Debtor 1	Tara		West		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Neme	Loot Nome		
United States Bankru	First Name uptcv Court for the:	Middle Name	Last Name orthern District of Illinois		
Case number (if known)					Check if this is an amended filing
Official Form	106Sum				
Summary		ssets and	Liabilities an	d Certain Statis	stical

### Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	<b>#</b> 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$6,555.00
1c. Copy line 63, Total of all property on Schedule A/B	\$6,555.00
Part 2: Summarize Your Liabilities	
	Varia liabilità
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$14,254.93
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	φ0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$25,107.34
Your total liabilities	\$39,362.27
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$3,560.83
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$3,410.00

Debtor 1

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Dogument Middle Name

Part	4: Answer These Questions for Administrative and Statistical Records		
	e you filling for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court w  Yes	vith your other schedules.	
<b>1</b>	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarifamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this form to the court with your other schedules.	§ 159.	
	om the Statement of Your Current Monthly Income: Copy your total current monthly income from Offici rm 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ial	\$4,472.82
9. <b>Co</b>	py the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
	From Part 4 on Schedule E/F, copy the following:		
g	la. Domestic support obligations (Copy line 6a.)	\$0.00	
g	b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
g	c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
g	dd. Student loans. (Copy line 6f.)	\$0.00	
g	e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
g	of. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00	
g	g. <b>Total</b> . Add lines 9a through 9f.	\$0.00	

Fill in this information	to identify your case:			17/19 . 7	10.04.45	Desc Main
Debtor 1	Tara		West			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:	N	orthern District of Illinois			
Case number (if known)						Check if this is an amended filing

### Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

d you pay or agree to pay someone who is NOT an	n attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	· · · · · · · · · · · · · · · · · · ·
nder penalty of perjury, I declare that I have read the	e summary and schedules filed with this declaration and that they are true and correct.
nder penalty of perjury, I declare that I have read the	
•	
nder penalty of perjury, I declare that I have read the  /s/ Tara West Tara West, Debtor 1	
/s/ Tara West	e summary and schedules filed with this declaration and that they are true and correct.

Case 19-17237 Doc 1 Filed 06/17/19 Entered 06/17/19 16:04:45 Desc Main

Fill in this information	to identify your case:			
Debtor 1	Tara		West	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	N	orthern District of Illinois	
Case number (if known)				Check if this is an amended filing

### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

. What is your current  Married  Not married	marital status?			
<b>☑</b> No	s, have you lived anywhere o			
Pes. List all of the position 1:	olaces you lived in the last 3 ye	ars. Do not include where y  Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Number Street  City	State ZIP Code	_ From To	Number Street  City State ZIP Code	Same as Debtor 1 From To
Number Street		_ From To	Same as Debtor 1  Number Street	Same as Debtor 1 From To
City	State ZIP Code	_	City State ZIP Code	_
cial Form 107			for Individuals Filing for Bankruptcy	ŗ

3. Within the last 8 include Arizona, Carlor No  Yes. Make sure Explain  4. Did you have any Fill in the total amoulf you are filing a join No  Yes. Fill in the filling a join No  From January 1 date you filed for last calendar (January 1 to Decomposite Company 1 to Deco	A years, did you ever live was alifornia, Idaho, Louisiana, ure you fill out Schedule H:  In the Sources of Your my income from employment of income you received int case and you have income details.	Nevada, New Mexico, Puerto  Your Codebtors (Official For  Income  ent or from operating a busic of from all jobs and all busines	alent in a community properto Rico, Texas, Washington, and management 106H).  Incess during this year or the tases, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	two previous calendar years?	
3. Within the last 8 include Arizona, Carlor No  Yes. Make sure Part 2: Explain  4. Did you have any Fill in the total amoulf you are filing a join No  Yes. Fill in the filling a join No  From January 1 date you filed for last calendar (January 1 to Decomposite Company 1	B years, did you ever live walfornia, Idaho, Louisiana, ure you fill out Schedule H:  In the Sources of Your my income from employment of income you received int case and you have income details.	with a spouse or legal equiv Nevada, New Mexico, Puerto Your Codebtors (Official For Income ent or from operating a busid from all jobs and all busines me that you receive together,  Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	alent in a community properto Rico, Texas, Washington, and the Rico Rico, Texas, Washington, and the management of the m	two previous calendar years? ies.  Debtor 2  Sources of income Check all that apply.  Wages, commissions,	Gross Income (before deductions and
include Arizona, Ca  No  Yes. Make su  Part 2: Explain  4. Did you have any Fill in the total amoulf you are filing a joir  No  Yes. Fill in the  From January 1 date you filed for  For last calendar (January 1 to Dec	alifornia, Idaho, Louisiana, ure you fill out Schedule H:  In the Sources of Your  In the Sources of Y	Nevada, New Mexico, Puerto  Your Codebtors (Official For  Income  ent or from operating a busid from all jobs and all busines me that you receive together,  Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	iness during this year or the tisses, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	two previous calendar years? ies.  Debtor 2  Sources of income Check all that apply.  Wages, commissions,	Gross Income (before deductions and
include Arizona, Ca  No  Yes. Make su  Part 2: Explain  4. Did you have any Fill in the total amoulf you are filing a joir  No  Yes. Fill in the  From January 1 date you filed for  For last calendar (January 1 to Dec	alifornia, Idaho, Louisiana, ure you fill out Schedule H:  In the Sources of Your  In the Sources of Y	Nevada, New Mexico, Puerto  Your Codebtors (Official For  Income  ent or from operating a busid from all jobs and all busines me that you receive together,  Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	iness during this year or the tisses, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	two previous calendar years? ies.  Debtor 2  Sources of income Check all that apply.  Wages, commissions,	Gross Income (before deductions and
Yes. Make su  Part 2: Explain  4. Did you have any Fill in the total amou If you are filing a joir  No Yes. Fill in the  From January 1 date you filed for  For last calendar (January 1 to Dec  For the calendar (January 1 to Dec  5. Did you receive a	n the Sources of Yourney income from employmount of income you received int case and you have income details.	ent or from operating a busid from all jobs and all busines me that you receive together,  Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	iness during this year or the tases, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	Debtor 2  Sources of income Check all that apply.	(before deductions and
A. Did you have and Fill in the total amount fyou are filing a join No  Yes. Fill in the form January 1 date you filed form January 1 to Decomposition (January 1 to Decomposition)  For the calendar (January 1 to Decomposition)  For the calendar (January 1 to Decomposition)	n the Sources of Yourney income from employmount of income you received int case and you have income details.	ent or from operating a busid from all jobs and all busines me that you receive together,  Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	iness during this year or the tases, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	Debtor 2  Sources of income Check all that apply.	(before deductions and
4. Did you have an Fill in the total amount fill in the total amount fill you are filling a joir No  Yes. Fill in the From January 1 date you filed for For last calendar (January 1 to Decomposite Control of the calendar (January 1 to Decomposite	ny income from employmount of income you received int case and you have income details.	ent or from operating a busic of from all jobs and all busines me that you receive together,  Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	Ses, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	Debtor 2  Sources of income Check all that apply.	(before deductions and
4. Did you have and Fill in the total amount for you are filing a join No  Yes. Fill in the From January 1 date you filed for January 1 to Decomposite Company 1 to Decompo	ny income from employmount of income you received int case and you have income details.	ent or from operating a busic of from all jobs and all busines me that you receive together,  Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	Ses, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	Debtor 2  Sources of income Check all that apply.	(before deductions and
Fill in the total amount you are filing a join No No Yes. Fill in the From January 1 date you filed for January 1 to Decomposition of the calendar (January 1 to Decomposition).  For the calendar (January 1 to Decomposition).	unt of income you received int case and you have income details.	Debtor 1  Sources of income Check all that apply.  Wages, commissions bonuses, tips	Ses, including part-time activit list it only once under Debtor 1  Gross Income (before deductions and exclusions)	Debtor 2  Sources of income Check all that apply.	(before deductions and
From January 1 date you filed for last calendar (January 1 to Dec For the calendar (January 1 to Dec 5. Did you receive a	e details.	Debtor 1  Sources of income Check all that apply.  ✓ Wages, commissions bonuses, tips	Gross Income (before deductions and exclusions)	Debtor 2  Sources of income Check all that apply.  Wages, commissions,	(before deductions and
From January 1 date you filed for last calendar (January 1 to Dec For the calendar (January 1 to Dec 5. Did you receive a	of current year until the	Sources of income Check all that apply.  Wages, commissions bonuses, tips	(before deductions and exclusions)	Sources of income Check all that apply.  Wages, commissions,	(before deductions and
From January 1 date you filed for For last calendar (January 1 to Dec January 1 to Dec Janu	of current year until the	Sources of income Check all that apply.  Wages, commissions bonuses, tips	(before deductions and exclusions)	Sources of income Check all that apply.  Wages, commissions,	(before deductions and
For last calendar (January 1 to Dec For the calendar (January 1 to Dec		Check all that apply.  Wages, commissions bonuses, tips	(before deductions and exclusions)	Check all that apply.  Wages, commissions,	(before deductions and
For last calendar (January 1 to Dec For the calendar (January 1 to Dec		Check all that apply.  Wages, commissions bonuses, tips	(before deductions and exclusions)	Check all that apply.  Wages, commissions,	(before deductions and
For last calendar (January 1 to Dec For the calendar (January 1 to Dec		Wages, commissions bonuses, tips	exclusions)	☐ Wages, commissions,	`
For last calendar (January 1 to Dec For the calendar (January 1 to Dec		bonuses, tips	\$23,400.00		
For last calendar (January 1 to Dec  For the calendar (January 1 to Dec			\$23,400.00	bonuses, tips	
For the calendar (January 1 to Dec		Operating a husiness		_	
For the calendar (January 1 to Dec		eperating a basiness		Operating a business	
For the calendar (January 1 to Dec	r year:	☑ Wages, commissions	·,	☐ Wages, commissions,	
For the calendar (January 1 to Dec	cember 31, <u>2018</u> )	bonuses, tips	\$54,000.00	bonuses, tips	
(January 1 to Dec	YYYY	Operating a business		Operating a business	
5. Did you receive a	r year before that:	☑ Wages, commissions	i, \$\phi_42.000.00	☐ Wages, commissions,	
	cember 31, <u>2017</u> )	bonuses, tips	\$43,000.00	bonuses, tips	
	YYYY	Operating a business		Operating a business	
	ardless of whether that inc	dividends; money collected fro	other income are alimony; child	I support; Social Security, unempabling and lottery winnings. If you	, ,
<b>☑</b> No					
Yes. Fill in the	e details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income from each	h Sources of income	Gross Income from each
		Describe below.	source	Describe below.	source
			(before deductions and exclusions)		(before deductions and exclusions)
From January 1	of current year until the				
-	•				
	•				

	1 1131 114	ime	Middle Name	West Last Name	<u> </u>	Case number (n	f known)	
		me	Middle Name	Last Name				
For the ca (January 1  Tt 3: Lis  Are either  No.	alendar yea	r:				_		
	1 to Decemb	oer 31, <u>2018</u> YYY	<u></u> )			<del>.</del> -		
						<u> </u>		
For the ca	alendar yea	r before that:				_		
January 1	1 to Decemb	oer 31, <u>2017</u> YYY	<u>_</u> )			_	_	
		111	·		-	<u> </u>		
t 3: Li	st Certai	n Payments	You Made E	Before You Filed	for Bankruptcy			
ro oithor	r Dobtor 1'o	or Dobtor 2's	dobto primorily	angumer debte?				
<b>_</b> No.				arily consumer debt or household purpose		ned in 11 U.S.C. § 101(8) as	s "incurred by an	
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?							
	□ No. Go to line 7.							
						ore payments and the total a		
	1	creditor. Do not payments to an	include paymer attorney for this	nts for domestic supp bankruptcy case.	ort obligations, such as chi	ld support and alimony. Also	o, do not include	
	* Subject to	adjustment on	4/01/22 and eve	ery 3 years after that f	or cases filed on or after the	e date of adjustment.		
Yes.				arily consumer debt		0		
	No. Go		you liled for barr	ikrupicy, dia you pay a	any creditor a total of \$600 o	or more:		
	_		oroditor to whom	m you paid a total of <sup>9</sup>	2600 or more and the total s	amount you paid that creditor	Do not include	
	1	payments for d	omestic support			Also, do not include payment		
		this bankruptcy	case.	Dates of	Total amount paid	Amount you still owe	Was this payment for	
				payment	rotal amount paid	Amount you still owe	was this payment for	
							☐Mortgage	
_								
_	Creditor's Na	ne					☐ Car	
-	Creditor's Na	me					☐ Car ☐ Credit card	
_		me Street					☐ Credit card ☐ Loan repayment	
_							☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors	
_							☐ Credit card☐ Loan repayment	

Case 19-17237 Doc 1 Filed 06/17/19 Entered 06/17/19 16:04:45 Desc Main Document Page 45 of 67 Debtor 1 West Tara Case number (if known) First Name Middle Name Last Name Dates of Total amount paid Amount you still owe Reason for this payment payment Insider's Name Street Number City State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√**No Yes. List all payments that benefited an insider. Dates of Total amount paid Reason for this payment Amount you still owe payment Include creditor's name Insider's Name Number Street City State ZIP Code Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **√**No Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending Case title \_\_\_ On appeal Court Name ■ Concluded

Case number \_\_\_

Number

City

Street

State

ZIP Code

	Case 19-	-17237 D	Document	Page 46 of 67			
ebtor 1	Tara First Name	Middle Name	west  East Name	Ca	ise number (if know	n)	
	riist Name	Wildule Name	e Last Name				
	year before you file at apply and fill in the		was any of your property repos	sessed, foreclosed, garnished,	attached, seized, o	r levied?	
<b>✓</b> No. Go	to line 11.						
Yes. Fi	ll in the information b	elow.					
			Describe the prope	rty	Date	Value of the proper	ty
Creditor's N	Name		_				_
Number	Chroat		 Explain what happe	anad			
Number	Street		Property was repo				
			Property was fored				
			Property was garr				
City	Sta	te ZIP Code	Property was attac	ched, seized, or levied.			
√ No	ayment because you						
Yes. Fi	ll in the details.						
			Describe the action the cred	ditor took	Date action was	Amount	
Creditor's N	Name				taken		
Number	Street						
City	State	e ZIP Code	Last 4 digits of account numbe	er: XXXX	1		
			was any of your property in the	possession of an assignee for	the benefit of cred	litors, a court-appointed	
	ustodian, or anothe	r official?					
✓No							
Yes							
art 5: Li	st Certain Gifts	and Contribut	tions				
3. Within 2	years before you fil	ed for bankruptc	y, did you give any gifts with a to	tal value of more than \$600 pe	r person?		
√No				•	•		
	II in the details for ea	nch aift					
103.11	ii iii tile detaile lei ee	ion girt.					
icial Form 1	07	s	Statement of Financial Affairs for	Individuals Filing for Bankru	otcy		pag

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otor 1	Tara		West	Case number (if kn	own)
	First Name	Middle Name	Last Name		
Gifts with person	a total value of more th	nan \$600 per	Describe the gifts	Dates you gave the gifts	e Value
Person to V	Vhom You Gave the Gift				
Number	Street				
City	State	ZIP Code			
Person's re	elationship to you				
4. Within 2 : ✓ No	years before you filed fo	or bankruptcy, o	lid you give any gifts or contributions with a tota	al value of more than \$600 to	any charity?
	I in the details for each g	ift or contributio	n.		
	ontributions to charitie e than \$600	es that Descri	be what you contributed	Date you contributed	Value
Charity's Na	nme				
,					
Number	Street				
City	State ZIP (	Code			
art 6: Lis	st Certain Losses				
	year before you filed for	bankruptcy or	since you filed for bankruptcy, did you lose any	thing because of theft, fire, o	ther disaster, or gambling?
5. Within 1					
<b>5. Within 1</b> ∶					
✓No	I in the details.				
✓ No  ☐ Yes. Fil  Describe	l in the details. the property you lost ar oss occurred	Include th	any insurance coverage for the loss the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
✓ No  ☐ Yes. Fil  Describe	the property you lost ar	Include th	e amount that insurance has paid. List pending	Date of your loss	Value of property lost

otor 1	Tara	West	Case number (if known)
	First Name M	fliddle Name Last Name	
art 7: Li	ist Certain Payments	or Transfers	
eking bar	nkruptcy or preparing a bar	ankruptcy, did you or anyone else acting on your behalf pay nkruptcy petition?	
•	attorneys, bankruptcy petitio	on preparers, or credit counseling agencies for services require	а іп уойг рапктиртсу.
□No			
Yes. F	fill in the details.		
Pohert I	. Adams & Associates	Description and value of any property transferred	Date payment or Amount of paymen transfer was made
	/ho Was Paid	Attorney's Fee	
540 E. 35	5th Street		6/11/2019 \$600.0
Number	Street		
Ohioon	II 00040		
Chicago, City	, IL 60616 State ZIP Cod	de	
•	gmail.com		
Email or w	website address		
Person W	ho Made the Payment, if Not \	<del>/ou</del>	
Credit Ad	dvicore	Description and value of any property transferred	Date payment or Amount of paymen transfer was made
	/ho Was Paid	Credit Counseling	autori was made
1818 Soi	ut 72nd Street	G .	06/11/2019 \$10.0
Number	Street		
-			
Omaha, I City	NE 68124 State ZIP Cod		
City	State ZIF Cot	AC .	
Email or v	website address		
Person W	ho Made the Payment, if Not Y	You	
	•		
7. Within 1	l year before you filed for ba	ankruptcy, did you or anyone else acting on your behalf pay	or transfer any property to anyone who promised to
	our creditors or to make pay Ide any payment or transfer th		
	ide any payment or transier tr	iat you listed of fille 10.	
√No			
	ill in the details.		
☐ Yes. F			
Yes. F		Description and value of any property transferred	Date payment or Amount of paymen transfer was made
	/ho Was Paid	Description and value of any property transferred	
	/ho Was Paid	Description and value of any property transferred	
Person W		Description and value of any property transferred	
	/ho Was Paid Street	Description and value of any property transferred	
Person W		Description and value of any property transferred	
Person W		Description and value of any property transferred	
Person W			

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	Case 19-1	L7237	Doc 1	Document	· ·	
Debtor 1	Tara First Name	Middle	e Name	West Last Name	Case number (if known)	
	i iist Name	Middle	e Name	Last Name		
ordinary co Include both Do not include	urse of your business	or financ transfers	ial affairs? made as secur	ity (such as the granting of	transfer any property to anyone, other than proper a security interest or mortgage on your property).	rty transferred in the
			Description transferred	and value of property	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person W	ho Received Transfer		_			
Number	Street		_			
		·				
City	State ZI					
Person's i	relationship to you					
<b>∐</b> Yes. F	ill in the details.		Description	and value of the property	transferred	Date transfer was made
Name of t	rust					
Part 8: Li	st Certain Financ	ial Acco	ounts, Instru	uments, Safe Deposi	t Boxes, and Storage Units	
transferred Include ched	?	narket, or	other financial		struments held in your name, or for your benefit, oposit; shares in banks, credit unions, brokerage hous	
<b>√</b> No	o, accomancino, ana on					
☐ Yes. F	ill in the details.					
fficial Form 1	107		Statemen	nt of Financial Affairs for I	ndividuals Filing for Bankruptcy	page

	Case I	9-11231	Doc 1	Filed 06/17/19 Document	Entered 06/17 Page 50 of 67	7/19 16:04:45	
otor 1	Tara	N 41 -1 -11 -	Name -	West		Case number (if known) _	
	First Name	Middle		Last Name	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Fi	inancial Institution		XXXX		☐ Checking ☐ Savings		
Number	Street				☐ Money market ☐ Brokerage		
					Other		
City	State	ZIP Code					
<b>√</b> No ☐Yes. Fi	ill in the details.						
			Who else h	ad access to it?	Describe the co	ontents	Do you still have it?
Name of Fi	inancial Institution		Name				□ No □ Yes
			Number S	treet			
Number	Street						
Number	Street		City	State ZIP Code	<u> </u>		
Number	Street	ZIP Code	City	State ZIP Code	e		
City	State		•		e in 1 year before you filed f	for bankruptcy?	
City	State		•			or bankruptcy?	
City  2. Have yo  1. No	State		•			or bankruptcy?	
City Have yo \( \square\) No	State u stored property		nit or place oth				Do you still have it?
City Have yo \( \square\) No	State u stored property		nit or place oth	ner than your home withi	in 1 year before you filed f		
City ∴ Have yo ☑ No ☑ Yes. Fi	State u stored property		nit or place oth	ner than your home withi	in 1 year before you filed f		it?
City  2. Have yo  1 No  1 Yes. Fi	State u stored property ill in the details.		Who else h	ner than your home withi	in 1 year before you filed f		it? ☐No
City 2. Have yo ☑ No ☐ Yes. F	State u stored property ill in the details. torage Facility		Who else h	ner than your home withi	Describe the co		it? ☐No

	_	237 Doc 1		Entered 06/17/19 16:04:4 Page 51 of 67	
ebtor 1	Tara First Name	Middle Name	West Last Name	Case number (if ki	10wn)
Part 9: Ide	entify Property You				
	<u> </u>				
23. Do you h	old or control any prope	erty that someone els	se owns? Include any prope	rty you borrowed from, are storing for, or	nold in trust for someone.
<b>√</b> No					
Yes. Fill	I in the details.				
		Where is	the property?	Describe the property	Value
Owner's Na	me	Number	Street	_	
Number	Street			_	
		City	State ZIP Code	_	
City	State ZIP C	ode			
Part 10: G	ive Details About E	Environmental In	formation		
For the nurn	ose of Part 10, the follo	wing definitions ann	alve-		
			•	pollution, contamination, releases of hazard	lous or toxic substances, wastes
or mater				iding statutes or regulations controlling the c	
		r property as defined u	under any environmental law,	whether you now own, operate, or utilize it or	used to own, operate, or utilize it,
■ Hazardo	g disposal sites. <i>us material</i> means anyth nant, or similar term.	ing an environmental l	aw defines as a hazardous wa	aste, hazardous substance, toxic substance,	hazardous material, pollutant,
	•	ceedings that you kr	now about, regardless of whe	en they occurred.	
24. Has any	governmental unit notif	ied you that you may	/ be liable or potentially liabl	e under or in violation of an environmenta	ıl law?
<b>√</b> No	•		, , , , , , , , , , , , , , , , , , , ,		
	lio do a dedella				
Yes. Fill	I in the details.				
		Governme	ntal unit	Environmental law, if you know it	Date of notice
Name of site	e	Governmenta	l unit		
Number	Street	Number S	Street		
		City	State ZIP Code		
City	State ZIP C	ode			
•					
25. Have you	ı notified any governme	ental unit of any relea	se of hazardous material?		
<b>√</b> No					
Yes. Fill	I in the details.				
=					
official Form 10	07	Statemer	nt of Financial Affairs for Ind	lividuals Filing for Bankruptcy	page <b>10</b>

	Case 19-17	7237 Doc 1	Filed 06/17/1 Document	9 Entered 06/17/19 Page 52 of 67	16:04:45 Desc Main
tor 1	Tara		West	•	e number (if known)
	First Name	Middle Name	Last Name		,
		Governm	ental unit	Environmental law, if you kno	ow it Date of notice
				-	
Name of site	e	Governmen	tal unit		
Number	Street	Number	Street	_	
		City	State ZIP Code	_	
City	State ZIP	Code			
. <b>Have you</b> <b>√</b> 1No	been a party in any ju	idicial or administrat	ive proceeding under any	v environmental law? Include settl	ements and orders.
Yes. Fill	in the details.				
		Court or a	ngency	Nature of the case	Status of the case
Case title _				_	☐Pending
		Court Name			On appeal
		Number	Street	-	☐Concluded
Case numbe	or				
″. Within 4 y	years before you filed to	for bankruptcy, did y mployed in a trade, pr		ve any of the following connection either full-time or part-time	ns to any business?
	partner in a partnership				
	officer, director, or mar	• •	•		
_			securities of a corporation		
	ne of the above applies.				
Yes. Ch	eck all that apply above		pelow for each business.  the nature of the busine	ess Employer Id	entification number
Name					de Social Security number or ITIN.
-				EIN:	
Number	Street				
	Olicci	Name of	accountant or bookkoon	or Dates husing	ess existed
	- Control	Name of	accountant or bookkeep		
	Olicet	Name of	accountant or bookkeep		ess existed To

	Case	19-17237	Doc 1	Filed 06/17/19 Document	Page 53 of 67		Desc Main
ebtor 1	Tara			West		Case number (if know	n)
	First Name	Midd	le Name	Last Name			
28. Within 2 or other par		you filed for ban	kruptcy, did yo	u give a financial statemer	nt to anyone about your	r business? Include all f	nancial institutions, creditors,
<b>∑</b> INo							
Yes. Fi	ill in the details	below.					
			Date issue	ed			
Name			MM / DD / YY	YY			
Number	Stroot		_				
Number	Street						
City	Sta	ate ZIP Code	_				
Oity	Jia	ite Zii Code					
Part 12: S	Sign Below						
I have read to	the answers or	making a false	statement, con	ffairs and any attachment cealing property, or obtain to 20 years, or both. 18 U.	ing money or property	by fraud in connection v	
I have read t	the answers or	making a false	statement, con	cealing property, or obtain	ing money or property	by fraud in connection v	
I have read to correct. I un can result in	the answers or nderstand that n fines up to \$2	making a false 250,000, or impri /s/ Tara West	statement, con	cealing property, or obtain to 20 years, or both. 18 U.	ing money or property   S.C. §§ 152, 1341, 1519,	by fraud in connection v	
I have read to correct. I un can result in	the answers or	making a false 250,000, or impri /s/ Tara West	statement, con	cealing property, or obtain	ing money or property   S.C. §§ 152, 1341, 1519,	by fraud in connection v	
I have read to correct. I un can result in	the answers or nderstand that n fines up to \$2	making a false 250,000, or impri /s/ Tara West	statement, con	cealing property, or obtain to 20 years, or both. 18 U.	ing money or property   S.C. §§ 152, 1341, 1519,	by fraud in connection v	
I have read to correct. I un can result in	the answers on nderstand that n fines up to \$2 ature of Tara We	making a false 250,000, or impri /s/ Tara West	statement, con	cealing property, or obtain to 20 years, or both. 18 U.	ing money or property   S.C. §§ 152, 1341, 1519,	by fraud in connection v	
I have read to correct. I un can result in Signal	the answers or inderstand that in fines up to \$2 ature of Tara Wood 106/17/2019	making a false 250,000, or impri	statement, cone sonment for up	cealing property, or obtain to 20 years, or both. 18 U.	ing money or property S.C. §§ 152, 1341, 1519,	by fraud in connection v and 3571.	
I have read to correct. I un can result in Signa	the answers or inderstand that in fines up to \$2 ature of Tara Wood 106/17/2019	making a false 250,000, or impri	statement, cone sonment for up	cealing property, or obtain to 20 years, or both. 18 U.  X Signature of Date	ing money or property S.C. §§ 152, 1341, 1519,	by fraud in connection v and 3571.	
I have read to correct. I un can result in Signal	the answers or inderstand that in fines up to \$2 ature of Tara Wood 106/17/2019	making a false 250,000, or impri	statement, cone sonment for up	cealing property, or obtain to 20 years, or both. 18 U.  X Signature of Date	ing money or property S.C. §§ 152, 1341, 1519,	by fraud in connection v and 3571.	
I have read to correct. I un can result in Signal Date Did you atta	the answers on onderstand that in fines up to \$2 ature of Tara Wi	making a false 250,000, or impri	statement, cone sonment for up	x Signature of Date	ing money or property l S.C. §§ 152, 1341, 1519, of	by fraud in connection v and 3571.	
I have read to correct. I un can result in Signal Date Did you atta	the answers on onderstand that in fines up to \$2 ature of Tara Wi	making a false 250,000, or impri	statement, cone sonment for up	cealing property, or obtain to 20 years, or both. 18 U.  X Signature of Date	ing money or property l S.C. §§ 152, 1341, 1519, of mals Filling for Bankrupte hkruptcy forms?	by fraud in connection v and 3571.	rith a bankruptcy case

Fill in this information	to identify your case:			17/19 10.04.45	Desc Main
Debtor 1	Tara		West		
	First Name	Middle Name	Last Name		
Debtor 2				_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankru	uptcy Court for the:	N	orthern District of Illinois	_	
Case number (if known)					Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Pa	art 1: List You	ır Creditors Who Have Secured Cla	ims	
1.	For any creditors	s that you listed in Part 1 of Schedule D: Cre	editors Who Have Claims Secured by Property (Official F	orm 106D), fill in the information below.
	Identify the cred	litor and the property that is collateral	What do you intend to do with the property that s debt?	secures a Did you claim the property as exempt on Schedule C?
	Creditor's name:	Capital One Auto Finance	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	☑ No ☐ Yes
	Description of property	2014 Volkswagen Jetta	✓ Retain the property and enter into a Reaffirmation Agreement.	<b>_</b>
	securing debt:		Retain the property and [explain]:	

Debtor 1

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D+ 0	1 1 - 4	\	I the server to a self	D I	D	
Part 2:	LIST	Your	Unexpired	Personai	Property	Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? ☐ No Lessor's name: Yes Description of leased property: ■ No Lessor's name: Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Signature of Debtor 1

Date 06/17/2019 MM/ DD/ YYYY Signature of Debtor 2

MM/ DD/ YYYY

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### United States Bankruptcy Court Northern District of Illinois

In re	<u> </u>	Case No		
	Debtor(s)	Chapter	7	
	DISCLOSURE	E OF COMPENSATION OF ATTORNEY FOR DEBT	TOR(S)	
1.	named debtor(s) and that c bankruptcy, or agreed to be	9(a) and Fed. Bankr. P. 2016(b), I certify that I am compensation paid to me within one year before the paid to me, for services rendered or to be rendered or in connection with the bankruptcy case is as f	he filing of the petition in ed on behalf of the	
	✓ FLAT FEE			
	For legal services, I hav	ve agreed to accept	\$600.	00
	Prior to the filing of this	statement I have received		
	Balance Due		\$600.	
	RETAINER		\$0.	<u>00</u>
	For legal services, I have	ve agreed to accept and received a retainer of		
	The undersigned shall l	bill against the retainer at an hourly rate of		
		ate schedule.] Debtor(s) have agreed to pay all Corenses exceeding the amount of the retainer.	urt	
2	\$0.00 of the filing fee ha	as been paid.		
3.	The source of the compensat	tion to be paid to me was:		
	<b>☑</b> Debtor	Other (specify)		
4.	The source of compensation	to be paid to me is:		
	<b>☑</b> Debtor	Other (specify)		
	☑ I have not agreed to share unless they are members and	e the above-disclosed compensation with any othe associates of my law firm.	er person	
	persons who are not member	e above-disclosed compensation with a other pers s or associates of my law firm. A copy of the agree nes of the people sharing in the compensation, is	ement,	
6. I	n return for the above-disclos	sed fee, I have agreed to render legal service for a	all aspects	

a. Analysis of the debtor's financial situation, and rendering advice to the debtor

in determining whether to file a petition in bankruptcy;

of the bankruptcy case, including:

	Case 19-17237	Doc 1		Entered 06/17/19		
In re	West, Tara		Document	Page 57 of 67	Case N	0

Debtor(s)

#### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- 7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/17/2019/s/ Robert J AdamsDateSignature of Attorney

Robert J. Adams & Associates

Name of law firm

# Case 19-17237 Doc 1 INFINE OF INFINE

IN RE: West, Tara

CASE NO

CHAPTER 7

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debto	or hereby verifies that the atta	ached list of creditors is true and correct to the best of his/her knowledge.
Date06/17/2019	Signature	/s/ Tara West Tara West, Debtor

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Americash Loans PO Box 187 Des Plaines, IL 60016

Athletico c/o East Bank Club 500 N. Kingsbury Chicago, IL 60610

Capital One Auto Finance 3901 Dallas Parkway Plano, TX 75093

City Of Chicago (Parking Tickets) Office Of The Clerk: Attn: Anna Valencia 121 N. LaSalle 107A Chicago, IL 60602

Comenity Bank/Victoria Secret Po Box 182789 Columbus, OH 43218

Credit Acceptance Corp PO Box 513 Southfield, MI 48037

Credit First National Association PO Box 81083 Cleveland, OH 44181

Credit One Bank PO Box 98872 Las Vegas, NV 89193

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Direct Loan Service System PO Box 5609 Greenville, TX 75403

First American Financial 801 W 10302 S Halsted Chicago, IL 60628

First Rate Financial 1507 E. 87th St. Chicago, IL 60619

GFS II LLC; dba Gateway Financial Solutions c/o Walinski & Associates 2215 Enterprise Dr Ste 1512 Westchester, IL 60154-5804

Greentrust Loans PO Box 340 Hays, MT 59527

MOHELA/DEPARTMENT OF ED 633 SPIRIT DRIVE Chesterfield, MO 63005

Peoples Energy 130 E. Randolph Dr. Chicago, IL 60687-6207

Prog Leasing, LLC 256 W Data Dr Draper, UT 84020-2315

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Sprint
P.O.Box 600760
P.O.Box 600760
Jacksonville, FL 32260-0670

State Collection Service PO Box 6250 Madison, WI 53701

University of Chicago Medicine 33343 Collections Dr Chicago, IL 60693

Walinski & Associates, PC 221 N Lasalle 1000 Chicago, IL 60601

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Deb	otor 1 Tara			Wes		. αί	gc 02 01 01			
First Name Middle Name				t Name		Case num	Case number (if known)			
Par	rt 6: Answer These Questic	ns for	Reportir	ng Purpose	es					
16.	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
	114401			Go to line 16						
			✓ Yes.	. Go to line 1	17.					
		16b.	Are your for a bus	debts prima	arily busines	ss de	<b>bts?</b> Business debts are debts that the operation of the business or	it you invest	incurred to obtain money ment.	
				Go to line 16						
			☐ Yes.	. Go to line 1	7.					
		16c.	State the	type of debt	ts you owe t	nat ar	re not consumer debts or business	debts	5.	
17.	Are you filing under Chapter		No. I an	n not filing ur	nder Chapte	r 7. G	Go to line 18.		757 M	
	7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds	Ø	Yes. I an	n filing under	r Chapter 7.	Do v	ou estimate that after any exempt I that funds will be available to dist	prope ribute	erty is excluded and to unsecured creditors?	
	will be available for distribution to unsecured creditors?			Yes						
		$   \sqrt{} $	1-49 🔲	50-99 🔲	100-199		1,000-5,000  5,001-10,000		25,001-50,000	
18.	How many creditors do you estimate that you owe?		200-999				10,001-25,000		50,000-100,000	
	outhous that you one;								More than 100,000	
			\$0-\$50,00	00			\$1,000,001-\$10 million	П	\$500,000,001-\$1 billion	
19.	How much do you estimate		\$50,001-\$	\$100,000			\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion	
	your assets to be worth?		\$100,001	-\$500,000			\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion	
			\$500,001	-\$1 million			\$100,000,001-\$500 million		More than \$50 billion	
		$ \mathbf{\Delta} $	\$0-\$50,00	00			\$1,000,001-\$10 million		\$500,000,001-\$1 billion	
20.	How much do you estimate		\$50,001-\$	\$100,000			\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion	
	your liabilities to be?		\$100,001-	-\$500,000			\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion	
			\$500,001-	-\$1 million			\$100,000,001-\$500 million		More than \$50 billion	
Part	7: Sign Below							ij	The state of the s	
_										
For	you I have	examine	d this petit	tion, and I de	eclare under	pena	alty of perjury that the information p	rovid	ed is true and correct.	
	States	Code. I	understan	d the relief a	7, i am awa wailable und	re tha er ea	at I may proceed, if eligible, under ch chapter, and I choose to procee	Chapt ed und	ter 7, 11,12, or 13 of title 11, United der Chapter 7.	
	If no at	torney re	epresents i	me and I did he notice red	not pay or a	agree	to nav someone who is not an att	orney	to help me fill out this document, I	
							I, United States Code, specified in	this p	petition.	
	l under	stand m	aking a fal	lse statemen	t, concealing	a proi	perty or obtaining money or prope	rty by	fraud in connection with a	
	and <u>35</u>	71	200		W \$250,000	L, or i	mprisonment for up to 20 years, or	both.	. 18 U.S.C. §§ 152, 1341, 1519,	
	1	ara We	st, Debtor	1						
	E	xecuted	d on <u>06/11</u>	DD/ YYYY						

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 6

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Fill in this Information	on to identify your case	9:			
Debtor 1	Tara		West		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	N	orthern District of Illinois		
Case number (if known)	<u> </u>				Check if this is an amended filing

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?
<b>☑</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have rea	d the summary and schedules filed with this declaration and that they are true and correct.

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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otor 1	Tara		West	Case number (if known)
	First Name	Middle Name	Last Name	Case Hamber (17 Khown)
. Within	2 years before you fil	ed for bankruptcy, di	d you give a financial statement	to anyone about your business? Include all financial institutions
untois, c	or other parties.			
<b>V</b> No				
Yes. F	ill in the details below	ı.		
		Date iss	ued	
Name		MM / DD /	YYYY	
Number	Street			
City	State Z	P Code		

#### Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

**√**No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

M No

Yes. Name of person \_\_\_\_\_

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Part 2: List Your Unexpired Personal Property Leases

Describe your unexpired personal property leases	Will the lease be assumed
essor's name:	
	□ Yes
Description of leased property:	☐ res
.essor's name:	□ No
Description of leased property:	Yes
essor's name:	□ No
Description of leased property:	☐ Yes
essor's name:	
Description of leased roperty:	☐ Yes
essor's name:	□ No
Description of leased roperty:	☐ Yes
essor's name:	□ No
escription of leased roperty:	Yes
essor's name;	☐ No
escription of leased roperty:	☐ Yes
3: Sign Below	
der penalty of perjury, I declare that I have indicated my intention about an operty that is subject to an unexpired lease.	ny property of my estate that secures a debt and any personal
gnature of Debtor 1 Signature of D	Debtor 2
J.g. idial of E	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Del	btor 1	Tara First Name	Middle Name	West		Case num	nber (if known)	
THE PROPERTY OF THE PARTY OF TH		ristrant	Middle Name	Last Name		Column A Debtor 1	Column B Debtor 2 or	
8. 1	Unemployme	nt compensation				\$0.00	non-filing spouse	
I	Do not enter t	he amount if you	contend that the amoun	it received was a be	nefit under			
t	the Social Sec	curity Act. Instead	, list it here:		↓			
	For you.				\$0.00			
and the second	For your	spouse						
9. F	Pension or re		Do not include any amo		as a benefit	\$0.00		
	received as a	e any benefits red victim of a war ci	s not listed above. Spec served under the Social rime, a crime against hu y, list other sources on	Security Act or pay	ments			
Medicina de reconstructo de maio	Total amount	s from separate p	ages, if any.					
11.	Calculate voi	ır total current m	onthly income. Add line Column A to the total fo	es 2 through 10 for or Column B.	each	\$4,472.82	+	= \$4,472.82  Total current monthly income
Par	t 2: Determ	nine Whether t	the Means Test App	alian ta V				
	The second secon		income for the year. F					
				No.				
•	ıza. Copy yo	ur total current mo	onthly income from line	11			Copy line 11 here → _	\$4,472.82
			r of months in a year).					<b>x</b> 12
1	2b. The resu	ılt is your annual i	ncome for this part of th	ne form.			12b.	\$53,673.84
13. <b>C</b>	Calculate the	nedian family inc	ome that applies to yo	u. Follow these ster	os:		120.	\$53,673.64
		in which you live.		Illinois				and the state of t
F	ill in the numb	per of people in yo	our household.	2	energy (			**************************************
			i.e.		and the second s			AAA
in	nstructions for		for your state and size on income amounts, go on the amounts, go on the available are also be available.			separate	13.	\$71,578.00
						s no presumption of abus		PREMIUM CRAMMAN
1	4b. Line 1: Go to I	≥b is more than lin Part 3 and fill out f	ie 13. On the top of pag Form 122A–2.	ge 1, check box 2, 7	he presumption (	of abuse is determined by	y Form 122A-2.	***************************************
Part	ि 3: Sign B	elow						A A A A A A A A A A A A A A A A A A A
	By signing he	ere, I declare unde	er penalty of perjury tha	t the information on	this statement a	nd in any attachments is	true and correct.	
	x 10	e of Debtor 1	Dest		X			
	Date	06/11/2019			7500 1700	ature of Debtor 2		Total Control
		IM/DD/YYYY			Date_	MM/DD/YYYY		w.com.
			T fill out or file Form 12					THE PROPERTY OF THE PROPERTY O
	If you checke	d line 14b, fill out	Form 122A–2 and file it	t with this form.				On Andrew Control of the Control of

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

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IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: West, Tara

CASE NO

CHAPTER 7

The a	bove named Debtor	ereby verifies that the attached list of creditors is true and correct	t to the best of his/her knowledge
Date	06/11/2019	Signature Tala West	
		Tara West, Debto	r